

Nurses and Certified Nursing Assistants Bridge the Pressure Injury Research-Practice Gap in Long-Term Care

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Background

- Most Pressure Injuries (PIs) are preventable, yet 60,000 people die each year from PIs
- Geriatric residents in Long Term Care Facilities (LTCFs) are at high risk for PIs.
- PI incidence in LTCFs is up to 32.4%. The majority (70%) occur in individuals aged 70 years and older.
- Care rendered in LTCFs is primarily from Licensed Vocational Nurses (LVN) and Certified Nursing Assistants (CNA) who receive minimal or no PI education and training.

Problem

The lack of standardized PI prevention training & adherence to PI clinical guidelines (PICG) in a LTCF in California

Purpose

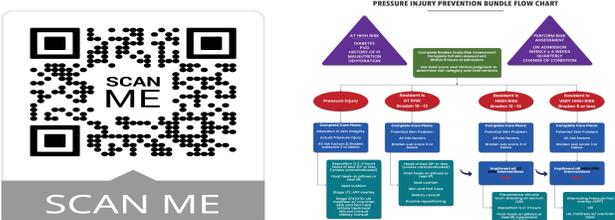
- Prevent Facility-Acquired PIs (FAPIs) at one LTCF
- Improve PI knowledge, skills, competence, and adherence to PICGs among LVNs, Registered Nurses (RNs), and CNAs

Sample and Setting

Participants	• 36 Nurses & CNAs	RN	5%
		LVN	27%
Setting	• A 98-bed LTCF in California	CNA	66%

PI Prevention Bundle Flow Chart

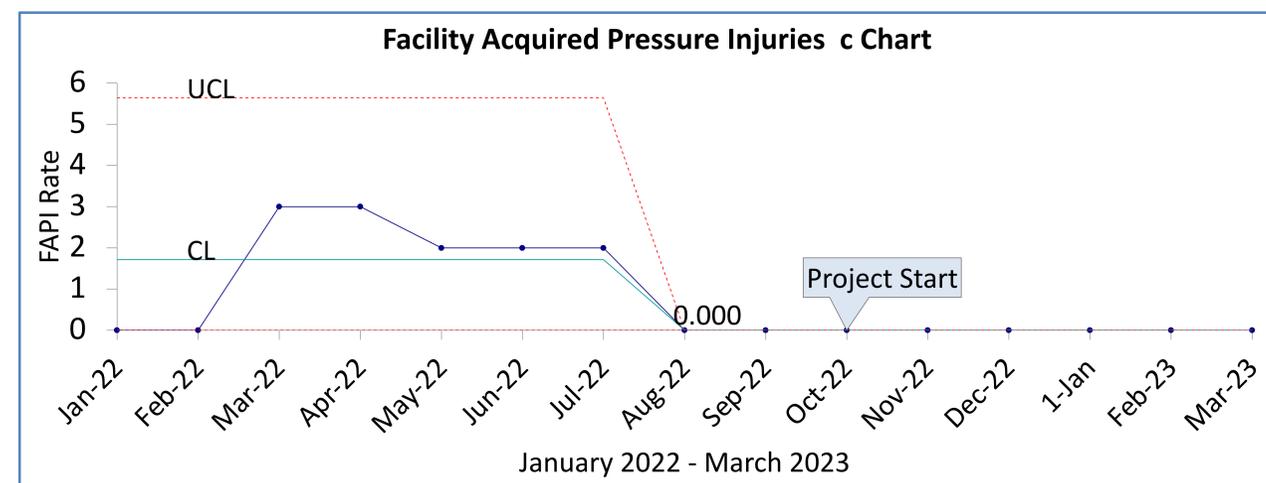
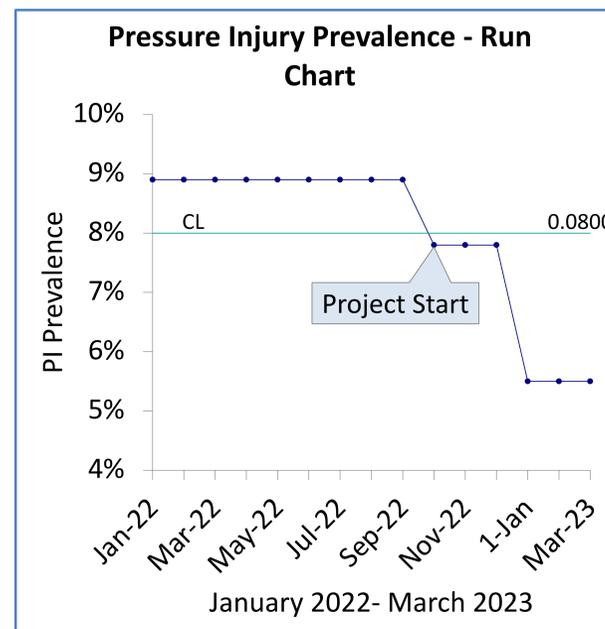
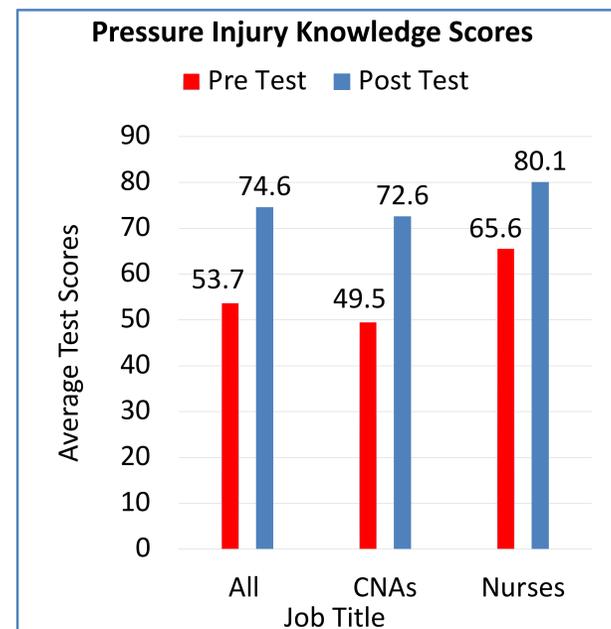
Developed and implemented a PIPB flowchart based on PICGs to guide PI prevention interventions. Scan below to view!



A pressure injury prevention bundle improves adherence to evidence-based pressure injury clinical guidelines and can help prevent facility-acquired PIs.

Instituting regular PI workshops in Long Term Care Facilities for nurses and CNAs improves pressure injury knowledge, skill, and competency.

Results



Measures

Outcome: Maintain zero FAPIs at the LTCF during implementation

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|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outcome: Clinical staff knowledge | <ul style="list-style-type: none"> • Improved scores on PZ-PUKT test • Improved scores on CNA PI prevention test |
| Process Measures: Adherence to PI clinical guidelines & PIPB | <ul style="list-style-type: none"> • % of residents receiving a PI risk assessment same day of admission • % of residents receiving a comprehensive skin assessment same day of admission. • % of LAL support surfaces with appropriate linen layers • % of LAL support surfaces on the correct pressure setting |

Methods

- Design: PDSA-guided Quality Improvement Project
- Pre-post tests measurement of PI knowledge
 - PZ-PUKT Knowledge Test - Nurses
 - PI Prevention Knowledge Test - CNAs
- Developed and provided a one-hour educational PI Workshop based on PICGs
- Developed and implemented a Pressure Injury Prevention Bundle (PIPB) flow chart

Conclusions

- PI prevalence decreased & FAPI rate remained zero.
- PI education statistically increased nurse and CNA knowledge ($t=8.16, p < .001$).
- Implementing routine facility-wide PI education combined with PIPBs prevents FAPIs.
- Implementing PICGs in LTC is challenged by budget constraints, staffing shortages, and limited staff knowledge.
- Literature involving CNAs in PIP is limited. Well-designed studies are needed on PIP in LTCFs.